

DEPARTMENT OF HEALTH AND HUMAN SERVICES

AGENCY: Office of the Assistant Secretary for Health, Office of Population Affairs

FUNDING OPPORTUNITY TITLE: Announcement of Availability of Funds for a Clinical Training and Technical Assistance Project to Support the Title X Family Planning Program

ACTION: Notice

ANNOUNCEMENT TYPE: INITIAL COMPETITIVE COOPERATIVE AGREEMENT

FUNDING OPPORTUNITY NUMBER: PA-FPT-18-001

CFDA NUMBER: 93.260

CFDA PROGRAM: Family Planning Personnel Training

DATES:

Non-binding Letters of Intent: We are requesting non-binding letters of intent. Your letter of intent is due **June 4, 2018**.

Technical Assistance: A technical assistance webinar for potential applicants will be held within 30 days from the posting of this announcement. Please visit www.hhs.gov/opa for more information.

Please be sure to review the entire announcement promptly so you can have any questions answered well in advance of the application due date.

Applications: Your application is due **June 19, 2018 by 6 p.m. Eastern Time**. To receive consideration, you must submit your application electronically via Grants.gov no later than this

due date and time. If you do not submit your application by the specified deadline, we will return it to you unread. You must submit electronically via Grants.gov unless you obtain a written exemption from this requirement 2 business days in advance of the deadline from the Director, HHS/Office of the Assistant Secretary for Health (OASH) Office of Grants Management (OGM). To obtain an exemption, you must request one via email from the HHS/OASH OGM, and provide details as to why you are technologically unable to submit electronically through Grants.gov. Your request should be submitted at least 4 business days prior to the application deadline to ensure your request can be considered prior to 2 business days in advance of the deadline. If you request an exemption, include the following in your e-mail request: the HHS/OASH announcement number; your organization's DUNS number; your organization's name, address and telephone number; the name and telephone number of your Authorizing Official; the Grants.gov Tracking Number (for example, GRANT####) assigned to your submission; and a copy of the "Rejected with Errors" notification from Grants.gov. Send the request with supporting documentation to ogm.oash@hhs.gov. Note: failure to have an active System for Account Management (SAM) registration prior to the application due date will not be grounds for receiving an exemption to the electronic submission requirement. Failure to follow Grants.gov instructions to ensure software compatibility will not be grounds for receiving an exemption to the electronic submission requirement.

The HHS/OASH OGM will only accept applications via alternate methods (hardcopy paper via U.S. mail or other provider or PDF via email) from applicants obtaining prior written approval. If you receive an exemption, you must still submit your application by the deadline. Only applications submitted through the Grants.gov portal or alternate format (hardcopy paper via U.S. mail or other service or PDF via email) with an

approved written exemption will be accepted. *See* Section D.7 (“Other Submission Requirements”) for information on application submission mechanisms.

Executive Order 12372 comment due date: The State Single Point of Contact (SPOC) has 60 days from the application due date to submit any comments. For more information on the SPOC see section D.4 Intergovernmental Review.

To ensure adequate time to successfully submit your application, HHS/OASH recommends that you register as early as possible in Grants.gov since the registration process can take up to one month. For information on registering for Grants.gov, refer to <http://www.grants.gov> or contact the Grants.gov Contact Center 24 hours a day, 7 days a week (excluding Federal holidays) at 1-800-518-4726 or support@grants.gov.

Your organization is strongly encouraged to register multiple authorized organization representatives in Grants.gov to ensure someone is available to submit your application.

EXECUTIVE SUMMARY:

The Office of Population Affairs (OPA) announces the availability of funds for a Fiscal Year (FY) 2018 cooperative agreement award under the authority of section 1003 of Title X of the Public Health Service Act. This notice solicits applications for a project to establish and operate a family planning clinical training center that will serve Title X family planning services projects nationally. OPA’s intent is to fund one National Clinical Training Center for Family Planning (NCTCFP) as a cooperative agreement, for a period of up to three (3) years.

The successful applicant will be responsible for the design, development, implementation, and evaluation of a training program that includes four components: (1) Clinical

Skills Development; (2) Clinical Protocol Development; (3) Clinical Skills Assessment; and (4) a National Clinical Training Meeting to be held every year, with an in-person meeting held in 2020 and virtual meetings held in alternate years. The purpose of the family planning clinical training center is to ensure that health care practitioners and support staff who provide services in Title X-funded service projects have the knowledge, skills, and attitudes to effectively deliver high quality family planning services.

This notice solicits applications from public and private nonprofit entities to establish and operate a family planning clinical training center which will develop and provide, at a minimum, training and technical assistance to Title X family planning service grantees and sites that deliver clinical family planning and related preventive health services; information, education, and counseling related to family planning; and referral services as indicated.

All activities funded under this announcement must be in compliance with the Title X statute, as well as the program regulations and legislative mandates, as applicable. Copies of the Title X statute, regulations, and legislative mandates may be downloaded from the Office of Population Affairs web site at <http://www.hhs.gov/opa/familyplanning>.

HHS/OASH encourages applicants to review all program requirements, eligibility information, application format and submission information, evaluation criteria and other information in this funding announcement to ensure their application fully complies with all requirements and instructions.

A. PROGRAM DESCRIPTION:

The Office of Population Affairs (OPA) provides funding for grants and contracts to support training for personnel working in Title X-funded services projects pursuant to section

1003 of the Public Health Service Act (42 U.S.C. 300 a-1). The purpose of OPA-funded family planning training is to ensure that personnel working in Title X Family Planning Services projects have the skills, knowledge, and attitudes necessary to effectively manage and deliver high quality family planning services and programs within a holistic optimal-health framework. Optimal health refers to the best possible outcomes for an individual's physical, emotional, and social health.

OPA expects that the National Clinical Training Center for Family Planning (NCTCFP) funded under this announcement will work to fulfill that purpose by delivering training and technical assistance grounded in evidence-based principles and culturally and linguistically appropriate strategies. The successful applicant will develop and implement a process by which the NCTCFP will review, assess, and revise their clinical training and technical assistance plan, training design, and materials on an ongoing basis (e.g., annually) to ensure guidance and supporting materials are holistically focused on an optimal-health framework, up-to-date and align with culturally competent and linguistically appropriate standards, as well as with Federal and professional medical associations' published clinical recommendations and other nationally recognized standards of care.

From the early 1970s until the year 2000, OPA funded certificate family planning/women's health nurse practitioner training programs to ensure the availability of health care practitioners with expertise in family planning to work in Title X-funded clinics. In 2000, OPA began funding "clinical specialty" training programs, as a means to ensure health care practitioners had the hands-on knowledge and skills to provide effective, high quality family planning services in Title X-funded service projects. Beginning in 2006, the Family Planning Clinical Training cooperative agreement was funded to provide preceptor training and a biennial

clinical reproductive health conference. In 2015, OPA awarded a cooperative agreement to fund a new clinical training program which built upon all of the previous efforts and served Title X-funded service providers throughout the country. This notice announces the availability of funds to further develop and operate a clinical training program to support clinical knowledge and skills-building for Title X family planning services providers.

OPA seeks applications from public and private nonprofit entities to establish and operate a Title X family planning clinical training center, which will provide training, instruction, and technical assistance to health care practitioners and other staff who deliver care, counseling, and services in Title X-funded service projects. The successful applicant will demonstrate evidence of familiarity with and understanding of the diverse needs of the existing Title X family planning service delivery network. While the training and technical assistance materials developed in this project are for the purpose of training Title X grantees and their networks, the materials also may be of use to reproductive health and family planning service providers who, though not funded to provide Title X services, aim to deliver high quality care and services in a manner which mirrors the goals and objectives of OPA funded projects. The successful applicant will incorporate applicable evidence-based recommendations, practices and protocols as documented in respected publications such as in the Centers for Disease Control and Prevention (CDC) and Office of Population Affairs (OPA) joint publication, “Providing Quality Family Planning Services” (MMWR; 63 (No. 4)). In addition, the successful applicant will incorporate nationally recognized standards of care and applicable Federal and professional medical associations’ published clinical recommendations into training design, curricula development, and material creation, as appropriate.

OPA expects that the NCTCFP will use evidence-based information, and will incorporate best practices and/or evidence-informed practices into all aspects of training and technical assistance. In addition, the successful applicant will maintain knowledge of the most current research and standards of care in order to act as a resource on a broad range of clinical family planning, reproductive health, and other related health and preventive care issues for Title X grantees and their networks, and will contextualize clinical training activities within a holistic optimal-health framework. Approvable applications will demonstrate evidence that the applicant currently possesses accreditation to provide eligible training participants with continuing education credits, hours, units or their equivalent, which are accepted in all 50 states and the District of Columbia. OPA expects the clinical training center funded under this announcement will carry out four major elements. The NCTCFP will execute each in accordance with Federal and professional medical associations' published clinical recommendations and nationally-recognized standards of care, and will demonstrate incorporation of culturally and linguistically appropriate strategies, approaches, and standards.

1) Clinical Skills Development

The training center will ensure that Title X health care practitioners providing direct, hands-on clinical family planning services have the most current information, skills, and attitudes necessary for the effective delivery of high quality family planning services. OPA expects that the NCTCFP will develop and provide training, materials, and other assistance to improve the clinical skills of Title X family planning service providers. This includes, but is not limited to, increasing the capacity and improving the competency of clinicians who provide family planning and reproductive health services through 1) improving the knowledge base of clinicians regarding the delivery of clinical services, e.g., data updates, releases of new evidence and other

advances in clinical service provision; and 2) ensuring that the NCTCFP delivers training and education to Title X clinical providers throughout the entire project period, using a variety of training methods and learning modalities, including webinars, e-learning modules, and other multimedia tools. OPA expects the successful applicant clinical training center will make resources produced during the project period readily accessible to users remotely via a website, web-based modality, or other method, throughout the entirety of the project period.

Additionally, OPA expects the clinical training center will develop and make available clinical support tools, reflecting nationally recognized standards of care and Federal and professional medical associations' published clinical recommendations, for use in clinical settings. These tools should be in a format which is easy for family planning clinical practitioners to access, use, and reference, and should be available via internet. OPA expects the clinical training center funded through this announcement will develop and deliver clinical skills training, technical assistance, and tools using evidence-based practices and culturally competent and linguistically appropriate strategies, in order to address the diverse needs of Title X networks, providers, and clients.

2) Clinical Protocol Development

OPA expects the successful applicant will provide Title X recipients, subrecipients, and Title X clinical service providers with training, materials, and other assistance in the development of clinical protocols for providing Title X family planning services in accordance with current Federal and professional medical associations' published clinical recommendations and nationally recognized standards of care. In addition, the NCTCFP will ensure that training and technical assistance is made available to Title X service providers to help modify and adapt their existing clinical protocols to reflect changes and updates made to Federal and professional

medical associations' published clinical recommendations and nationally recognized standards of care. The NCTCFP will develop and deliver training, technical assistance, and tools by using evidence-based practices, and will address the needs of Title X Family Planning Services providers to enhance the delivery of high-quality family planning services.

3) Clinical Skill Assessment

OPA expects that the clinical training center funded under this announcement will develop and implement a strategy for continuously evaluating Title X family planning clinical providers' level of clinical skills. The purpose of this assessment is to provide grant directors, program and site managers, and clinicians with methods and tools to measure the level of Title X clinical providers' competency. The successful applicant will demonstrate their capacity to develop and implement cost-effective strategies and activities using evidence-based methodologies and innovative, state-of-the-art technology to facilitate and/or conduct clinical provider assessment and monitoring, with both in-person and remote functionality. The NCTCFP will evaluate the results of these assessments annually, and will use information gathered from the assessments and the subsequent evaluation to inform development of clinical training tools and materials, as well as to generate topics for additional training and possible collaboration with other entities and training centers, in order to improve the skills of Title X family planning service providers.

4) National Clinical Training Meeting

The recipient will conduct an in-person clinical training meeting in 2020 to provide those in attendance with current, evidence-based information on family planning and related preventive health issues, including new or emerging national standards of care, pertinent clinical

topics, clinical education and counseling issues and techniques, and other topics relevant to the delivery of family planning clinical services. In the intervening years, the recipient will conduct a virtual clinical training meeting for the same purposes. The content of the training meetings must incorporate culturally and linguistically appropriate strategies, techniques, and standards within a holistic optimal-health framework., and must reflect Federal and professional medical associations' published clinical recommendations; nationally recognized standards of care; the needs of the Title X Family Planning Services network; and Title X statute, as well as the program regulations and legislative mandates, as applicable.

The Office of Population Affairs often identifies specific programmatic focus areas and topics of importance. Each year, OPA will share the identified programmatic focus areas and topics with the NCTCFP. The successful applicant will address how it will incorporate these areas within the four training elements. For at least the first year of the clinical training center cooperative agreement the focus areas are:

1. Ensuring that Title X Grant directors, clinic managers, and clinical providers have the appropriate level of competency to ensure that Title X client services are coded and billed correctly to maximize reimbursement and cost recovery;
2. Ensuring that family planning providers have up-to-date information and skills to provide counseling and provision of a broad range of acceptable and effective contraceptive methods, with an emphasis on building skills and proficiency with a range of long-acting reversible contraceptive devices (LARC) and fertility awareness based methods (FABM);
3. Ensuring that Title X grantees have the necessary training and resources to respond to OPA Program Priorities and Key Issues, including annual training on child abuse,

- child molestation, sexual abuse, rape, incest, intimate partner violence, and human trafficking for Title X family planning service providers and clinic staff; and
4. Ensuring that an assessment strategy is implemented which will identify the current and future needs of the Title X clinical workforce, and assess the ability of the workforce to provide culturally appropriate and competent clinical services in accordance with Federal and professional medical associations' published clinical recommendations and nationally recognized standards of care.

Successful applicants will demonstrate their ability to monitor and evaluate training and other interventions, and will provide evidence of their experience in developing evidence-based strategies, implementing tested and reliable interventions, and conducting background research to ensure they produce and deliver training, technical assistance, and other resources with fidelity.

Program Statute, Regulations, Legislative Mandates, Program Priorities, and Key Issues

Statute: Title X of the PHS Act, 42 U.S.C. 300 *et seq.*, authorizes grants for projects to provide family planning services to persons from low-income families and others. Section 1001 of the Act, as amended, authorizes grants “to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services, and services for adolescents).” Section 1001 of the statute requires that, to the extent practicable, Title X entities which receive grants or contracts under this subsection shall encourage family participation in family planning services projects. This requirement applies throughout the

program, extending to all individuals, couples and families seeking Title X services, as practicable, always being mindful of the health, safety, and best interest of the client. Section 1003 of the Act, as amended, authorizes the Secretary of Health and Human Services to award grants to entities to provide training for personnel to carry out family planning services programs. Section 1008 of the Act, as amended, stipulates that “none of the funds appropriated under this title shall be used in programs where abortion is a method of family planning.”

Regulations: The regulations set out at 42 CFR part 59, subpart C, govern grants to provide training for family planning service providers. Training must be consistent with the requirements regarding the provision of family planning services under Title X, which can be found in the Title X statute and the implementing regulations for family planning services (42 CFR part 59, subpart A). In addition, any training regarding sterilization of clients as part of the Title X program must be consistent with 42 CFR part 50, subpart B (“Sterilization of Persons in Federally Assisted Family Planning Projects”).

Legislative Mandates: The following legislative mandates have been part of the Title X appropriations language for the last several years. This funding opportunity announcement assumes these provisions will be carried forward in FY 2018. Title X Family Planning Services projects should include administrative, clinical, counseling, and referral services as well as training of staff necessary to ensure adherence to these requirements.

- “None of the funds appropriated in this Act may be made available to any entity under Title X of the Public Health Service Act unless the applicant for the award certifies to the Secretary of Health and Human Services that it encourages family participation in the decision of minors to seek family planning services and that it

provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities;” and

- “Notwithstanding any other provision of law, no provider of services under Title X of the Public Health Service Act shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.”

All activities funded under this announcement must be in compliance with the Title X statute, as well as the program regulations and legislative mandates, as applicable. Copies of the Title X statute, regulations, and legislative mandates may be downloaded from the Office of Population Affairs web site at <http://www.hhs.gov/opa/familyplanning>.

Program Priorities: Each year the Office of Population Affairs establishes program priorities that represent overarching goals for the Title X program. Program priorities derive from the Department of Health and Human Services’ (HHS) priorities. Applicants should provide evidence of their capacity to address program priorities. The FY 2018 program priorities are as follows:

1. Assuring innovative, high quality family planning and related health services that will improve the overall health of individuals, couples, and families, with priority for services to those of low-income families, offering, at a minimum, core family planning services enumerated in the FY2018 *Announcement of Anticipated Availability of Funds for Family Planning Services Grants* (<https://www.grants.gov/web/grants/view-opportunity.html?oppId=297943>). Assuring that projects offer a broad range of family planning and related health services that are tailored to the unique needs of the individual,

that include natural family planning methods (also known as fertility awareness based methods) which ensure breadth and variety among family planning methods offered, infertility services, and services for adolescents; breast and cervical cancer screening and prevention of STDs as well as HIV prevention education, counseling, testing, and referrals;

2. Assuring activities that promote positive family relationships for the purpose of increasing family participation in family planning and healthy decision-making; education and counseling that prioritize optimal health and life outcomes for every individual and couple; and other related health services, contextualizing Title X services within a model that promotes optimal health outcomes for the client;
3. Ensuring that all clients are provided services in a voluntary, client-centered and non-coercive manner in accordance with Title X regulations;
4. Promoting provision of comprehensive primary health care services to make it easier for individuals to receive both primary health care and family planning services preferably in the same location, or through nearby referral providers, and increase incentive for those individuals in need of care choosing a Title X provider;
5. Assuring compliance with State laws requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, incest, intimate partner violence, and human trafficking;
6. Encouraging participation of families, parents, and/or legal guardians in the decision of minors to seek family planning services; and providing counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities;

7. Demonstrating that Title X activities are separate and clearly distinct from non-Title X activities, ensuring that abortion is not a method of family planning for this grant; and
8. Use of OPA performance metrics to regularly perform quality assurance and quality improvement activities.

Key Issues: In addition to program priorities, the following key issues should be considered in developing the project plan:

1. Efficiency and effectiveness in program management and operations;
2. Management and decision-making and accountability for outcomes;
3. Cooperation with community-based and faith-based organizations;
4. Meaningful collaboration with subrecipients and documented partners in order to demonstrate a seamless continuum of care for clients;
5. A meaningful emphasis on education and counseling that communicates the social science research and practical application of topics related to healthy relationships, to committed, safe, stable, healthy marriages, and the benefits of avoiding sexual risk or returning to a sexually risk-free status, especially (but not only) when communicating with adolescents;
6. Activities for adolescents that do not normalize sexual risk behaviors, but instead clearly communicate the research informed benefits of delaying sex or returning to a sexually risk-free status;
7. Emphasis on the voluntary nature of family planning services; and
8. Data collection (such as the Family Planning Annual Report (FPAR) for use in monitoring performance and improving family planning services.

Agency Substantial Involvement:

Award will be a cooperative agreement. OPA anticipates substantial programmatic involvement during the planning and performance of the project or activity. In addition to the usual monitoring and technical assistance provided under the cooperative agreement (e.g., assistance from assigned Federal project officer, regular conference calls, occasional monitoring visits, ongoing review of plans and progress, participation in relevant meetings, provision of training and technical assistance), **OPA substantial programmatic involvement will include:**

1. Assisting the recipient to establish, review, and update priorities for training and technical assistance activities conducted under the auspices of this cooperative agreement
2. Consulting with the recipient throughout the preparation and dissemination of products and materials (e.g., webinars, job aids, assessments, e-learning courses, etc.) related to this cooperative agreement to ensure clinical and programmatic accuracy;
3. Assisting the recipient to identify and contact other organizations, awardees, and Federal personnel with whom they may develop cooperative and collaborative relationships and partnerships, as appropriate; and
4. Keeping the awardee abreast of important Federal initiatives that could potentially influence the direction or implementation of a given strategy.

AUTHORITY: Section 1003 of the Public Health Service Act; Title X family planning training regulations at 42 CFR Part 59, subpart C.

B. FEDERAL AWARD INFORMATION

The Office of Population Affairs intends to make available approximately \$900,000 for one competing cooperative agreement

We will fund awards in annual increments (budget periods) and generally for a project period of up to 3 years, although we may approve shorter project periods. Funding for all approved budget periods beyond the first year of the award is generally level with the initial award amount and is contingent upon the availability of funds, satisfactory progress of the project, adequate stewardship of Federal funds, and the best interests of the Government.

Award Information

Estimated Federal Funds Available: \$900,000

Anticipated Number of Awards: 1

Award Ceiling (Federal Funds including indirect costs): \$900,000 per budget period

Award Floor (Federal Funds including indirect costs): \$600,000

Anticipated Start Date: 09/01/2018

Period of Performance: Not to exceed 3 years

Budget Period Length: 12 months

Type of Award: Cooperative Agreement. Agency substantial involvement is outlined in the Program Description in Section A.

Type of Application Accepted: Electronic via Grants.gov **ONLY unless an exemption is granted**

C. ELIGIBILITY INFORMATION

1. Eligible Applicants.

Any public or private nonprofit entity located in a State (which includes one of the 50 United States, District of Columbia, Commonwealth of Puerto Rico, U.S. Virgin Islands,

Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia, and the Republic of the Marshall Islands) is eligible to apply for a cooperative agreement under this announcement. Faith-based organizations and American Indian/Alaska Native/Native American (AI/AN/NA) organizations are eligible to apply for Title X family planning training grants.

2. Cost Sharing or Matching

You are not required to provide cost sharing or matching in your proposed budget.

3. Other Eligibility Information

Application Disqualification Criteria

If you successfully submit an application, we will screen it to assure a level playing field for all applicants. If we determine your application fails to meet the criteria described below we will disqualify it, that is, it will **not** be reviewed and will receive **no** further consideration.

- a) You must submit your application electronically via www.grants.gov (unless an exemption was granted 2 business days prior to the deadline) by the date and time indicated in the DATES section of this announcement.
- b) If you successfully submit multiple applications from the same organization for the same project, we will only review the last application received by the deadline.
- c) HHS/OASH/OGM deems your application eligible according to section C.1 *Eligible Applicants*.
- d) Your Project Narrative section of the application must be double-spaced, on the equivalent of 8 ½" x 11" inch page size, with 1" margins on all sides (top, bottom, left and right) and font size not less than 12 points.

- e) Your Project Narrative must **not** exceed 50 pages. NOTE: The following items do not count toward the page limit: all required forms, including SF-424, SF-424A, SF-424B, SF-LLL, Project Abstract Summary, and Budget Narrative (including budget tables).
- f) Your total application, including the Project Narrative plus Appendices, must **not** exceed 110 pages. NOTE: items listed in “e” immediately above do not count toward total page limit.
- g) Your Federal funds request including indirect costs does **not** exceed the maximum indicated in Award Ceiling.
- h) Your Federal funds request including indirect costs is **not** below the minimum indicated in Award Floor.

D. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

You may obtain an application package electronically by accessing Grants.gov at <http://www.grants.gov/>. You can find it by searching on the CFDA number shown on page 1 of this funding opportunity announcement. If you have problems accessing the application or difficulty downloading, contact:

Office of Grants Management

Phone: 240-453-8822

Email: ogm.oash@hhs.gov

2. Content and Form of Application Submission

i. Letter of Intent

If you plan to apply for this funding opportunity, you should submit a letter of intent as early as possible, but no later than the **deadline indicated in the DATES section of this**

announcement. Although you are not required to submit a letter of intent, the information that it contains allows HHS/OASH to estimate the potential review workload and plan the review. A letter of intent is not binding, and is not part of the review of a subsequent application. Your letter of intent should include a descriptive title of your proposed project, the name, street address, email address, and telephone number for the designated authorized representative of your organization, and the FOA number and title of this announcement. Your letter of intent should be sent to the address listed under the AGENCY CONTACTS in section G.

ii. Application Format

Your application must be prepared using the forms and information provided in the online application package.

The Project Narrative, and total application including appendices, must adhere to the page limit indicated in Application Disqualification Criteria listed in Section C.

You must double-space the Project Narrative pages.

You should use an easily readable typeface, such as Times New Roman or Arial. You *must* use 12-point font. You may single-space tables or use alternate fonts but you must ensure the tables are easy to read. The page limit does not include the Budget Narrative (including budget tables), required forms, assurances, and certifications as described in the Application Disqualification Criteria. Please do not number pages or include a table of contents. Our grants management system will generate page numbers once your application is complete.

If your application exceeds the specified page limits for the Project Narrative or Project Narrative plus Appendices when printed on 8.5” X 11” paper by HHS/OASH/OGM, we will not review it. We recommend you print out your application before submitting electronically to ensure that it is within the page limits and is easy to read.

Appendices

Your Appendices should include any specific documents outlined in Section D.2.iii., under the heading “Appendices” in the Application Content section of this funding opportunity announcement. Your documents should be easy to read. You should use the same formatting specified for the Project Narrative. However, documents such as resumes/CVs, organizational charts, tables, or letters of commitment may use formatting common to those documents, but the pages must be easy to read. All of your appendices must be uploaded as a single, consolidated file in the Attachments section of your Grants.gov application.

Project Abstract Summary

You must complete the Project Abstract Summary form provided in the application package. The abstract will be used to provide reviewers with an overview of the application and will form the basis for the application summary in grants management and program summary documents. If your project is funded, HHS may publish information from your form; therefore, do not include sensitive or proprietary information.

Budget Narrative

The Budget Narrative should use the formatting required of the Project Narrative for the explanatory text. Budget tables may be single-spaced but should be laid out in an easily-readable format and within the printable margins of the page.

iii. Application Content

Successful applications will contain the following information:

Project Narrative

The Project Narrative is the most important part of the application, since it will be used as the primary basis to determine whether or not your project meets the minimum requirements for an award under this announcement. The Project Narrative should provide a clear and concise description of your project. HHS/OASH recommends that your project narrative include the following components:

Understanding of the Project's Context and Objectives

Technical Approach

Project Management and Organizational Capacity

Evaluation Plan

Understanding of the project's context and objectives: This section should demonstrate a thorough understanding of the purpose, scope and activities of the project. In particular, the approvable application will demonstrate knowledge and understanding in the following areas:

- The mission and organization of the Title X program;
- The role of training and technical assistance in the Title X program at a national level, and OPA's interest in and objectives for this project;
- How the project plan will adequately provide for the following requirements set out in the Title X training regulations at 42 CFR § 59.205(a)(1-3):
 - An assurance that no portion of the Federal funds will be used to train personnel for programs where abortion is a method of family planning.

- An assurance that no portion of the Federal funds will be used to provide professional training to any student as part of his education in pursuit of an academic degree.
- An assurance that no project personnel or trainees shall on the grounds of sex, religion or creed will be excluded from participation in, be denied the benefits of, or be subjected to discrimination under the project.

Technical Approach: This section should describe how the applicant would approach the development and implementation of clinical training and technical assistance for Title X service grantees, and will be used to assess the applicant's overall level of expertise in the development and delivery of family planning clinical training and technical assistance. An approvable application will include (i) a methodology to assess the particular training (e.g., skills, attitudes, or knowledge) that prospective trainees in the area to be served need to improve their delivery of family planning services; (ii) a methodology to define the objectives of the training program in light of the particular needs of trainees, (iii) a methodology for development of the training curriculum and any attendant training materials and resources, (iv) a method for implementation of the needed training, and (v) provision of a method and criteria by which trainees will be selected. The successful applicant will describe their overall approach to addressing all four of the major elements listed and described within the Program Description of this funding announcement (Clinical Skills Development; Clinical Protocol Development; Clinical Skill Assessment; National Clinical Training Meeting), and will:

1. Clearly identify the human performance improvement and/or instructional design frameworks and learning theories that will be used to guide the overall development of

the clinical training and technical assistance. The approvable application will also make explicit how the framework(s) and learning theories are applied at various points in the process of providing clinical training and technical assistance;

2. Propose the competencies (e.g., knowledge, skills) needed by staff at the grantee, sub-recipient and service site level to successfully provide high quality Title X family planning clinical services. In this context, “competencies” refer to the knowledge and skills an individual needs to perform specific job tasks;
3. Propose learning objectives to help the Title X service grantees successfully build the needed competencies (as defined above in element 2) in their service site networks. The learning objectives should describe specifically what the learner should be able to do after the instruction, and be specific, measurable, achievable, relevant, and time-oriented (SMART); and
4. Describe potential delivery modalities that can be used to provide clinical training and technical assistance to Title X service grantees to ensure relevant staff possess, build, and maintain the needed competencies. The successful applicant will be able to describe how a tiered level of training and technical assistance would be used in this project, including:
 - a. A universal level of training, e.g., prepackaged e-learning courses or webinars that are applicable to all service grantees and the entire Title X network, and can

be accessed by service grantees (or subrecipients and/or service sites) and used with only minor modifications;

- b. A selected level of training and/or technical assistance for a sub-set of service grantees (or subrecipients and/or service sites) that have a particular interest or need for assistance, e.g., creation of learning collaboratives comprised of several grantees with shared learning objectives; and
- c. An individualized level of technical assistance for individual service grantees (or subrecipients and/or service sites) that require one-on-one coaching to address specific challenges/barriers to optimal clinical performance.

The description of the training and technical assistance modalities should note the extent to which there is scientific evidence that the selected modalities change any of the following outcomes: Trainee knowledge, skills and attitudes; trainee practice/behavior; and/or client outcomes. Delivery modalities that do not rely exclusively upon in-person meetings are encouraged, such as e-learning or other forms of distance education. The project narrative should also include citations from relevant research, such as from the fields of training, implementation science, and improvement science to document that the proposed modalities are evidence-based.

Project Management and Organizational Capacity: This section should document how the applicant organization has previously achieved successful and concrete outcomes in developing, delivering and evaluating training and technical assistance in family planning and reproductive health care. The organizational capability statement should also

describe how the applicant agency is organized, the nature and scope of its work, and the capabilities it possesses. The application should include two organizational charts: (1) an organizational chart of the larger organization within which the project is hosted, which specifies where the project resides; and (2) an organizational chart for the project itself.

The application should also include a description of project personnel, including the extent to which staff possess high levels of expertise at the national level in the development and delivery of training and technical assistance in areas relevant to family planning and/or reproductive health services in a large programmatic context. Curriculum vitae or biographical sketches for key project personnel should be included.

The application should include a clear delineation of the roles and responsibilities of project staff and sub-recipients and any participating partner organizations, and how they will contribute to achieving the project's objectives and outcomes. It should specify who would have day-to-day responsibility for key tasks such as: leadership of project; monitoring the project's on-going progress; oversight and management of any subrecipient or partner organizations; preparation of reports; and communications with OPA.

The application should describe the approach that will be used to monitor and track progress on the project's tasks and objectives. HHS/OASH expects that, throughout the project period, the Project Director will have involvement in, and substantial knowledge about, all aspects of the project.

Evaluation: This section of the project narrative should clearly identify the measurable outcome(s) that will result from the clinical training center's activities. A "measurable outcome" is an observable end-result that describes how a particular

intervention benefits program participants. It demonstrates the “impact” of the intervention. For example, the outcome may be at the level of reaction (How well did the learners like the learning process?), learning (the extent to which the learners gain knowledge and skills), behavior (What changes in job performance resulted from the learning process?) or results (What are the tangible results of the learning process in terms of reduced cost, improved quality, increased production, efficiency, etc.?)

This section should also describe the methods that will be used to evaluate whether or not the proposed intervention achieves its measurable outcome(s) and assess and evaluate the impact of the training center’s activities. The project narrative should describe the quantitative and qualitative tools and techniques that will be employed to measure the outcome(s), and how the “lessons learned” will be identified and documented.

Budget Narrative

You must complete the required budget forms and submit a budget narrative with detailed justification as part of your application. You must enter the project budget on the Budget Information Non-construction Programs standard form (SF 424A) according to the directions provided with this standard form. The budget narrative consists of a detailed line-item budget that includes calculations for all costs and activities by "object class categories" identified on the SF-424A and justification of the costs.

Project budget calculations must include estimation methods, quantities, unit costs, and other similar quantitative detail sufficient to verify the calculations. If matching or cost sharing is required, you must include a detailed listing of any funding sources identified in box 18 of the SF-424 (Application for Federal Assistance).

Please be sure to carefully review section D.6 Funding Restrictions for specific information regarding allowable, unallowable, and restricted costs.

You must provide an object class category budget using Section B, box 6 of the SF 424A for the first year of the proposed project. Provide a budget justification, which includes explanatory text and line-item detail, for the first year of the proposed project. The budget narrative should describe how the categorical costs are derived. Discuss the necessity, reasonableness, and allocation of the proposed costs.

For subsequent budget years, provide a summary narrative and line item budget. For categories or items that differ significantly from the first budget year, provide a detailed justification explaining these changes. Note, **do not** include costs beyond the first budget year in the object class budget in box 6 of the SF- 424A or box 18 of the SF-424; the amounts entered in these sections should only reflect the first budget year.

Your budget narrative should justify the overall cost of the project as well as the proposed cost per activity, service delivered, and/or product. For example, the budget narrative should define the amount of work you have planned and expect to perform, what it will cost, and an explanation of how the result is cost effective. For example, if you are proposing to provide services to clients, you should describe how many clients are you expecting to serve, the unit cost of serving each client, and how this is cost effective.

Use the following guidelines for preparing the detailed object class budget required by box 6 of the SF-424A. The object class budget organizes your proposed costs into a set of defined categories outlined below. Both federal and non-federal resources (when required) must be detailed and justified in the budget narrative. "Federal resources" refers only to the

HHS/OASH funds for which you are applying. "Non-federal resources" are all other non-HHS/OASH federal and non-federal resources. We recommend you present budget amounts and computations in a columnar format: first column, object class categories; second column, federal funds requested; third column, non-federal resources; and last column, total budget.

Sample Budget Table

| Object Class | Federal Funds Requested | Non-federal Resources | Total Budget |
|--------------|-------------------------|-----------------------|--------------|
| Personnel | \$100,000 | \$25,000 | \$125,000 |

Note, subrecipient/contract and consultant detailed costs should all be included in those specific line items, not in the overall project object class line items, i.e., subrecipient travel should be included in the Contractual line item not in Travel.

Object Class Descriptions and Required Justifications

Personnel Description: Costs of staff salaries and wages, excluding benefits.

Personnel Justification: Clearly identify the project director or principal investigator, if known at the time of application. Provide a separate table for personnel costs detailing for each proposed staff person: the title; full name (if known at time of application), time commitment to the project as a percentage or full-time equivalent; annual salary and/or annual wage rate; federally funded award salary; non-federal award salary, if applicable; and total salary. No salary rate may exceed the statutory limitation in effect at the time you submit your application (see D.6 Funding Restrictions, *Salary Limitation* for details). Do not include the costs of consultants, personnel costs of delegate agencies, or of specific project(s) and/or businesses to be financed by the applicant. Contractors and consultants should not be placed under this category.

Sample Personnel Table

| Position Title and Full Name | Percent Time | Annual Salary | Federally-funded Salary | Non-federal Salary | Total Project Salary |
|--------------------------------|--------------|---------------|-------------------------|--------------------|----------------------|
| Project Director, John K. Doe | 50% | \$100,000 | \$50,000 | \$0 | \$50,000 |
| Data Assistant, Susan R. Smith | 10% | \$30,000 | | \$3,000 | \$3,000 |

Fringe Benefits Description: Costs of employee fringe benefits unless treated as part of an approved indirect cost rate.

Fringe Benefits Justification: Provide a breakdown of the amounts and percentages that comprise fringe benefit costs such as health insurance, Federal Insurance Contributions Act (FICA) taxes, retirement insurance, and taxes.

Travel Description: Costs of travel by staff of the applicant organization only.

Travel Justification: For each trip proposed for applicant organization staff only, show the date of the proposed travel, total number of traveler(s); travel destination; duration of trip; per diem; mileage allowances, if privately owned vehicles will be used; and other transportation costs and subsistence allowances. **Do not** include travel costs for subrecipients or contractors.

Equipment Description: "Equipment" means an article of nonexpendable, tangible personal property having a useful life of more than one year per unit and an acquisition cost that equals or exceeds the lesser of: (a) the capitalization level established by the organization for the financial statement purposes, or (b) \$5,000. (Note: Acquisition cost means the net invoice unit

price of an item of equipment, including the cost of any modifications, attachments, accessories, or auxiliary apparatus necessary to make it usable for the purpose for which it is acquired. Ancillary charges, such as taxes, duty, protective in-transit insurance, freight, and installation, shall be included in or excluded from acquisition cost in accordance with your organization's regular written accounting practices.)

Equipment Justification: For each type of equipment requested you must provide a description of the equipment; the cost per unit; the number of units; the total cost; and a plan for use of the equipment in the project; as well as a plan for the use, and/or disposal of, the equipment after the project ends. An applicant organization that uses its own definition for equipment should provide a copy of its policy, or section of its policy, that includes the equipment definition; include this with your Budget Narrative file. Reference the policy in this justification and include the policy copy in your Budget Narrative file (not your appendices).

Supplies Description: Costs of all tangible personal property other than those included under the Equipment category. This includes office and other consumable supplies with a per-unit cost of less than \$5,000.

Supplies Justification: Specify general categories of supplies and their costs. Show computations and provide other information that supports the amount requested.

Contractual Description: Costs of all contracts or subawards for services and goods except for those that belong under other categories such as equipment, supplies, construction, etc. Include third-party evaluation contracts, if applicable, and contracts or subawards with subrecipient organizations (with budget detail), including delegate agencies and specific

project(s) and/or businesses to be financed by the applicant. This line item is not for individual consultants.

Contractual Justification: Demonstrate that all procurement transactions will be conducted in a manner to provide, to the maximum extent practical, open, and free competition. Recipients and subrecipients are required to use 45 CFR § 75.329 procedures and must justify any anticipated procurement action that is expected to be awarded without competition and exceeds the simplified acquisition threshold fixed by 41 U.S.C. § 134, as amended by 2 CFR § 200.88, and currently set at \$150,000. Recipients may be required to make pre-award review and procurement documents, such as requests for proposals or invitations for bids, independent cost estimates, etc., available to HHS/OASH.

Note: Whenever you intend to delegate part of the project to another agency, the applicant must provide a detailed budget and budget narrative for each subrecipient/contractor, by agency title, along with the same supporting information referred to in these instructions. If you plan to select the subrecipients/contractors post-award and a detailed budget is not available at the time of application, the applicant must provide information on the nature of the work to be delegated, the estimated costs, and the process for selecting the delegate agency.

Other Description: Enter the total of all other costs. Such costs, where applicable and appropriate, may include but are not limited to: consultants; insurance; professional services (including audit charges); space and equipment rent; printing and publication; training, such as tuition and stipends; participant support costs including incentives, staff development costs; and any other costs not addressed elsewhere in the budget.

Other Justification: Provide computations, a narrative description, and a justification for each cost under this category.

Indirect Costs Description: Enter the total amount of indirect costs. Pursuant to 42 CFR §59.206(b)-(c), indirect costs shall be capped at 8% of modified total direct costs (MTDC).

Indirect Costs Justification: Provide the calculation for your indirect costs total, i.e., show each line item included in the base, the total of these lines, and the application of the indirect rate.

Program Income Description: Program income means gross income earned by your organization that is directly generated by this project if funded except as provided in 45 CFR § 75.307(f). Program income includes but is not limited to income from fees for services performed or the use or rental of real or personal property acquired under the award. Interest earned on advances of Federal funds is not program income. Except as otherwise provided in Federal statutes, regulations, or the terms and conditions of the Federal award, program income does not include rebates, credits, discounts, and interest earned on any of them. See also 45 CFR §§ 75.307, 75.407 and 35 U.S.C. §§ 200-212 (applies to inventions made under Federal awards).

Program Income Justification: Describe and estimate the sources and amounts of Program Income that this project may generate if funded. Unless being used for cost sharing, if applicable, these funds should not be added to your budget. This amount should be reflected in box 7 of the SF-424A.

Non-Federal Resources Description: Amounts of non-federal resources that will be used to support the project as identified in box 18 of the SF-424. For all federal awards, any shared costs or matching funds and all contributions, including cash and third-party in-kind

contributions, must be accepted as part of the recipient's cost sharing or matching when such contributions meet all of the criteria listed in 45 CFR § 75.306. For awards that require matching by statute, you will be held accountable for projected commitments of non-federal resources in your application budgets and budget justifications by budget period or by project period for fully-funded awards, even if the justification by budget period, or by project period for fully-funded awards, exceeds the amount required. Your failure to provide the required matching amount may result in the disallowance of federal funds. If you are funded, you will be required to report these funds on your Federal Financial Reports. For awards that do not require matching or cost sharing by statute or regulation, where "cost sharing" refers to costs of a project in addition to Federal funds requested that you voluntarily propose in your budget, if your application is successful, we will include this non-federal cost sharing in the approved project budget and you will be held accountable for the non-federal cost-sharing funds as shown in the Notice of Award (NOA). Your failure to provide voluntary cost sharing of non-federal resources that have been accepted by HHS/OASH as part of the approved project costs and that are shown as part of the approved project budget in the NOA may result in the disallowance of federal funds. If you are funded, you will be required to report these funds on your Federal Financial Reports. Note, you will not receive any preference, priority, or special consideration in the funding process for voluntarily including non-Federal cost sharing in your proposed budget.

Non-federal Resources Justification: You must provide detailed budget information for every funding source identified in box 18. "Estimated Funding (\$)" on the SF-424. Provide this documentation as part of your Budget Narrative file, not your Appendices.

You must fully identify and document in your application the specific costs or contributions you propose in order to meet a matching requirement. You must provide

documentation in your application on the sources of funding or contribution(s). In-kind contributions must be accompanied by a justification of how the stated valuation was determined. Matching or cost sharing must be documented by budget period (or by project period for fully-funded awards).

If your application does not include the required supporting documentation, it will not be disqualified from competitive review; however, it may impact your score under the evaluation criteria in Section V.1 of this announcement.

Plan for Oversight of Federal Award Funds

You must include a plan for oversight of federal award funds which describes:

- how your organization will provide oversight of federal funds and how award activities and partner(s) will adhere to applicable federal award and programmatic regulations.
- the organizational systems that demonstrate effective control over and accountability for federal funds and program income, compare outlays with budget amounts, and provide accounting records supported by source documentation.
- for any program incentives proposed, the specific internal controls that will be used to ensure only qualified participants will receive them and how they will be tracked.
- organizational controls that will ensure timely and accurate submission of Federal Financial Reports to the OASH Office of Grants Management and Payment Management Services as well as timely and appropriate withdrawal of cash from the Payment Management System.

Appendices

All items described in this section will count toward the total page limit of your application. You must submit them as a single electronic file uploaded to the Attachments section of your Grants.gov application.

Work Plan

Your Work Plan should reflect, and be consistent with, the Project Narrative and Budget Narrative, and must cover all three (3) years of the project period. However, each year's activities should be fully attainable in one budget year. You may propose multi-year activities, as well as activities that build upon each other, but each phase of the project must be discreet and attainable within a single budget year. Your Work Plan should include a statement of the project's overall goal, anticipated outcome(s), key objectives, and the major tasks, action steps, or products that will be pursued or developed to achieve the goal and outcome(s). For each major task of each year, action step, or product, your work plan should identify the timeframes involved (including start- and end-dates), and the lead person responsible for completing the task.

Letters of Commitment from Subrecipient Organizations and Agencies

You should include signed Letters of Commitment for all organizations and entities that have been specifically named as a subrecipient to carry out any aspect of the project. The signed letters of commitment ***must detail*** the specific role and resources that will be provided, or activities that will be undertaken, in support of the applicant. The organization's expertise, experience, and access to the targeted population(s) as well as their ability to deliver services within a holistic optimal-health framework should also be described in the letter of commitment.

Letters of commitment are not the same as letters of support. Letters of support are letters that are general in nature that speak to the writer's belief in the capability of an applicant to accomplish a goal/task. Letters of support also may indicate an intent or interest to work together in the future, but they lack specificity. You should NOT provide letters of support, and letters of support such as this will not be considered during the review.

Curriculum Vitae/Resume for Key Project Personnel

You must submit with your application curriculum vitae and/or resumes of all key personnel. Key Personnel includes those individuals who will oversee the technical, professional, managerial, and support functions and/or assume responsibility for assuring the validity and quality of your organization's program. This includes at a minimum the Principal Investigator/Project Director and Program Manager/Program Coordinator. The Principal Investigator/Project Director and Program Manager/Program Coordinator must possess documented family planning clinical care experience as either a licensed physician or as a licensed advanced-practice nurse.

Organizational Charts

The application should include two organizational charts: (1) an organizational chart of the larger organization within which the project is hosted, which specifies where the project resides; and (2) an organizational chart for the project itself.

3. Unique Entity Identifier and System for Award Management (SAM)

- You are required to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal awards through Grants.gov. It is a unique, nine-digit identification number, which provides

unique identifiers of single business entities. The DUNS number is *free and easy* to obtain.

- You will find instructions on the Grants.Gov web site as part of the organization registration process at <http://www.grants.gov/web/grants/applicants/organization-registration.html>.
- Your organization must register online in the System for Award Management (SAM). **Grants.gov will reject submissions from applicants with nonexistent or expired SAM Registrations.**
- If you are registering a new entity in SAM.gov, you must mail an “Entity Administrator Notarized Letter” to the **FEDERAL SERVICE DESK**, ATTN: [SAM.GOV](#) Registration Processing. Your notarized letter with the details required must be mailed. Your registration will not be activated until the letter is submitted and reviewed. For detailed instructions on the content of the letter and process see: https://www.fsd.gov/fsd-gov/answer.do?sysparm_kbid=d2e67885db0d5f00b3257d321f96194b&sysparm_search=kb0013183
- A quick start guide for registrants is available at https://www.sam.gov/sam/transcript/Quick_Guide_for_Grants_Registrations.pdf. You should allow a *minimum* of five days to complete an initial SAM registration. Allow up to 10 business days *after you submit* your registration for it to be active in SAM. This timeframe may be longer if the information you provide is flagged for manual validation. You will receive an email alerting you when your registration is active.

- If your organization is already registered in SAM, you must renew your SAM registration *each* year. Organizations registered to apply for Federal awards through <http://www.grants.gov> will need to *renew* their registration in SAM.
- You should make sure your SAM registration information is accurate, especially your organization's legal name and physical address including your ZIP+4. Should you successfully compete and receive an award, this information must be included on a Notice of Award. For instructions on updating this information see https://gsafsd.service-now.com/fsd-gov/answer.do?sysparm_kbid=c3d982af6fb8d5006f348d412e3ee47e
- It may take 24 hours or more for SAM updates to take effect in Grants.gov, so if you plan to apply for this funding opportunity or think you might apply, you should ***ensure your organization's registration is active in SAM well before the application deadline and will be active through the competitive review period.***
- If you are successful and receive an award, you must maintain an active SAM registration with current information at all times during which your organization has an active award or an application or plan under consideration by an HHS agency.

HHS/OASH cannot make an award until you have complied with these requirements. In accordance with 2 CFR § 25.205, at the time an award is ready to be made, if you have not complied with these requirements, HHS/OASH:

- May determine that you are not qualified to receive an award; and
- May use that determination as a basis for making an award to another applicant.

Should you successfully compete and receive an award, all first-tier sub-award recipients must have a DUNS number at the time you, the recipient, make a sub-award.

4. Submission Dates and Times

You must submit your application for this funding opportunity by **the date and time indicated in the DATES section of this announcement**. Your submission time will be determined by the date and time stamp provided by Grants.gov when you **complete** your submission.

If you fail to submit your application by the due date and time, we will not review it, and it will receive no further consideration. You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or with <http://www.grants.gov>. Grants.gov can take up to 48 hours to notify you of a successful or rejected submission. You are better off having a less-than-perfect application successfully submitted and under consideration than no application.

If your submission fails due to a system problem with Grants.gov, we may consider your application if you provide verification from Grants.gov indicating system problems existed at the time of your submission **and that time was before the submission deadline**. A “system problem” does not include known issues for which Grants.gov has posted instructions regarding how to successfully submit an application such as compatible Adobe versions or file naming conventions. **As the applicant, it is your responsibility to review all instructions available on Grants.gov regarding successfully submitting an application.**

5. Intergovernmental Review

Applications under this announcement are subject to the requirements of Executive Order 12372, “Intergovernmental Review of Federal Programs,” as implemented by 45 CFR part 100, “Intergovernmental Review of Department of Health and Human Services Programs and Activities.” As soon as possible, you should discuss the project with the State Single Point of Contact (SPOC) for the State in which your organization is located. The current listing of the SPOCs is available at http://www.whitehouse.gov/omb/grants_spoc.

The SPOC should forward any comments to the Department of Health and Human Services 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. The SPOC has 60 days from the due date listed in this announcement to submit any comments. For further information, contact the HHS/OASH Office of Grants Management at 240–453–8822.

6. Funding Restrictions

Direct and Indirect Costs proposed and if successful, charged to the HHS/OASH award must be allowable, reasonable, necessary, and allocable in accordance with Department regulations and policy effective at the time of the award. Current requirements are codified at 45 CFR part 75 “Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards.” These requirements apply to you, the applicant, *and* any subrecipients. You should thoroughly review these regulations before developing your proposed budget.

Indirect costs may be included per 45 CFR § 75.414. See the Budget Narrative section of this announcement for more information. To obtain a negotiated indirect cost rate with the Federal Government you may contact the U.S. Department of Health and Human Services Cost Allocation Services (CAS) regional office that is applicable to your State. CAS regional contact information is available at <https://rates.psc.gov/fms/dca/map1.html>.

Pre-Award Costs:

Pre-award costs are not allowed.

Salary Rate Limitation:

Each year's appropriations act limits the salary rate that you may be awarded and charge to HHS/OASH grants and cooperative agreements. Award funds should not be budgeted to pay the salary of an individual at a rate in excess of Executive Level II. As of January 7, 2018, the Executive Level II salary of the Federal Executive Pay scale is \$189,600. This amount reflects an individual's base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary rate limitation also applies to subawards/subcontracts under an HHS/OASH award.

As an example of the application of this limitation: If an individual's base salary is \$350,000 per year plus fringe benefits of 25% (\$87,500) and that individual is devoting 50% of their time to this award, their base salary should be adjusted to \$189,600, their direct salary would be \$94,800 (50% FTE), fringe benefits of 25% would be \$23,700, and a total of \$118,500 may be included in the project budget and charged to the award in salary/fringe benefits for that individual. See the breakdown below:

| | |
|--|-----------|
| Individual's <i>actual</i> base full time salary: \$350,000 | |
| 50% of time will be devoted to project | |
| Direct salary | \$175,000 |
| Fringe (25% of salary) | \$43,750 |
| Total | \$218,750 |
| Amount that may be claimed on the application budget due to the legislative salary rate limitation: | |
| Individual's base full time salary <i>adjusted</i> to Executive Level II: \$189,600 | |

| | |
|--|------------------|
| 50% of time will be devoted to the project | |
| Direct salary | \$94,800 |
| Fringe (25% of salary) | \$23,700 |
| Total amount | \$118,500 |

Appropriate salary rate limits will apply as required by law.

7. Other Submission Requirements

Electronic Submission

HHS/OASH requires that all applications be submitted electronically via the Grants.gov portal unless an exemption has been granted. If you submit an application via any other means of electronic communication, including facsimile or electronic mail, it *will not* be accepted for review unless you receive an exemption as described in the DATES section of this announcement.

You may access the Grants.gov website portal at <http://www.grants.gov>.

Applications, excluding required standard forms, must be submitted as three (3) files (see acceptable file types below). One file must contain the entire Project Narrative, another the entire Budget Narrative including supporting documentation described in the Budget Narrative content section; and the third file must contain all documents in the Appendices. Any additional files submitted as part of the Grants.gov application will not be accepted for processing and will be excluded from the application during the review process.

Any files uploaded or attached to the Grants.gov application must be Adobe PDF, Microsoft Word, or image formats (JPG, GIF, TIFF, or BMP only) and must contain a valid file

format extension in the filename. HHS/OASH strongly recommends that electronic applications be uploaded as Adobe PDF. If you convert to PDF prior to submission you may prevent any unintentional formatting that might occur with submission of an editable document. Please note, even though Grants.gov allows you to attach any file format as part of your application, HHS/OASH restricts this practice and only accepts the file formats identified above. Any file submitted as part of the Grants.gov application that is not in a file format listed above will not be accepted for processing and will be excluded from the application during the review process.

Any file submitted as part of the Grants.gov application that contains password protection will not be accepted for processing and will be excluded from the application during the review process. We will not contact you for passwords or resubmission of unprotected files. Unprotected information in the application will be forwarded for consideration but password protected portions will not. You should avoid submitting personally identifiable information such as personal contact information on résumés.

In addition, the use of compressed file formats such as ZIP, RAR, or Adobe Portfolio will not be accepted. We will not contact you for resubmission of uncompressed versions of files. Compressed information in the application will not be forwarded for consideration.

You must submit your application in a format that can easily be copied and read by reviewers. We do not recommend that you submit scanned copies through Grants.gov unless you confirm the clarity of the documents. Pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceeding the page limitation. If you submit documents that do not conform to these instructions, we will exclude them from your application during the review process.

Important Grants.gov Information

You may access the electronic application for this program on <http://www.grants.gov>. You must search the downloadable application page by the Funding Opportunity Number or CFDA number, both of which can be found on page 1 of this funding opportunity announcement.

To ensure successful submission of your application, you should carefully follow the step-by-step instructions provided at <http://www.grants.gov/web/grants/applicants/apply-for-grants.html>. These instructions are kept up-to-date and also provide links to Frequently Asked Questions and other troubleshooting information. **You are responsible for reviewing all Grants.gov submission requirements on the Grants.gov site.**

You should contact Grants.gov with any questions or concerns regarding the electronic application process conducted through Grants.gov. See Contacts below. See Section D.3 for requirements related to DUNS numbers and SAM registration.

Non-profit Status

If you are a non-profit organization, you must submit documentation of nonprofit status as part of your application. Any of the following constitutes acceptable proof of such status:

- a) A reference to the Applicant organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in the IRS code;
- b) A copy of a currently valid IRS tax exemption certificate;
- c) A statement from a State taxing body, State attorney general, or other appropriate State official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals; or
- d) A certified copy of the organization's certificate of incorporation or similar document that clearly establishes nonprofit status.

E. APPLICATION REVIEW INFORMATION

1. Criteria: Federal staff and an independent review panel will assess all eligible applications according to the following criteria. Disqualified applications will not be reviewed against these criteria:

1. **(10 points)** The degree to which the project plan adequately provides for the requirements set forth in the Title X statute, its implementing regulations at 42 CFR § 59.205, as well as the Program Priorities and Key Issues set out in this funding opportunity announcement.

2. **(10 points)** The extent to which the application provides: (i) a methodology to assess the particular training (e.g., skills, attitudes, or knowledge) that prospective trainees in the area to be served need to improve their delivery of family planning services; (ii) a methodology to define the objectives of the training program in light of the particular needs of trainees, (iii) a methodology for development of the training curriculum and any attendant training materials and resources, (iv) a method for implementation of the needed training, and (v) provision of a method and criteria by which trainees will be selected.

3. **(10 points)** The extent to which the proposed training program incorporates Federal and professional medical associations' evidence-based recommendations for family planning clinical care, culturally competent and linguistically appropriate standards, strategies, and practices, and nationally recognized standards of care; evidence of familiarity with national professional standards of care relevant to Title X clinical service delivery; and the ability to translate evidence-based information and holistic optimal-health frameworks into training activities.

4. **(20 points)** The capacity of the applicant to make rapid and effective use of the grant assistance, including evidence of the ability to effectively manage a national clinical training program that will carry out the four elements as described in the Program Description section of this announcement.

5. **(25 points)** The administrative and management capability and competence of the applicant and the competence of the applicant project staff in relation to the services to be provided, including demonstration of academic, clinical, and teaching competence of proposed faculty. In addition, the capacity of the applicant to design, develop, implement and evaluate the project's clinical activities provided at a national level, including: The extent to which the application provides an evaluation methodology, including the manner in which such methodology will be employed, to measure the achievement of the objectives of the training program (*see* 42 CFR § 59.205).

6. **(15 points)** The extent to which the training program promises to fulfill the family planning services delivery needs of the area to be served including, but not limited to: (a) Development of a capability within family planning service projects to provide pre- and in-service training to their staff; (b) Improvement of the family planning services delivery skills of family planning and health services personnel; and (c) Expansion of family planning services, particularly in rural areas, through new or improved approaches to program planning and deployment of resources, including clinicians.

7. **(10 points)** The extent to which the proposed training and technical assistance program will increase the delivery of services to people at the national level, in particular to individuals, couples, and families of low income, with a high percentage of unmet need for family planning

services. In addition, as listed in 42 CFR § 59.205, the extent to which the application includes assurances that no portion of the federal funds will be used to train personnel for programs where abortion is a method of family planning, no portion will be used to provide professional training to any student as part of his education in pursuit of an academic degree, and no project personnel or trainees shall on the grounds of sex, religion or creed be excluded from participation in, or be denied the benefits of, or be subjected to discrimination under the project.

2. Review and Selection Process

Each HHS/OASH Program's office is responsible for facilitating the process of evaluating applications and setting funding levels according to the criteria set forth in Title X regulations at 42 CFR § 59.206.

An independent review panel will evaluate applications that meet the responsiveness criteria, if applicable, and are not disqualified. These reviewers are experts in their fields, and are drawn from academic institutions, non-profit organizations, state and local government, and Federal government agencies. Based on the Application Review Criteria as outlined under Section E.1, the reviewers will comment on and score the applications, focusing their comments and scoring decisions on the identified criteria. In addition to the independent review panel, Federal staff will review each application for programmatic, budgetary, and grants management compliance. The Deputy Assistant Secretary for Population Affairs (DASPA) or designee will make final award selections to be recommended to the Grants Management Officer for risk analysis. In making these decisions, the DASPA or designee will take into consideration the following additional factor: The extent to which projects best promote the purposes of Sections 1001(family planning services) and 1003 (family planning training) of the Public Health Service Act, within the limits of funds available for such projects.

All award decisions, including level of funding if an award is made, are final and you may not appeal.

3. Review of Risk Posed by Applicant

The HHS/OASH will evaluate, in accordance with 45 CFR § 75.205, each application selected for funding by the program official indicated in Review and Selection Process for risks before issuing an award. This evaluation may incorporate results of the evaluation of eligibility or the quality of an application. If we determine that a Federal award will be made, special conditions that correspond to the degree of risk assessed will be applied to the Federal award. Such conditions may include additional programmatic or financial reporting or releasing funds on a reimbursable rather than cash advance basis. OASH will use a risk-based approach and may consider any items such as the following:

- (a) Your financial stability;
- (b) Quality of management systems and ability to meet the management standards prescribed in 45 CFR part 75;
- (c) History of performance. Your record in managing Federal awards, if you are a prior recipient of Federal awards, including timeliness of compliance with applicable reporting requirements, conformance to the terms and conditions of previous Federal awards, and if applicable, the extent to which any previously awarded amounts will be expended prior to future awards;
- (d) Reports and findings from audits performed; and
- (e) Your ability to effectively implement statutory, regulatory, or other requirements imposed on non-Federal entities.

Prior to making a Federal award with a total Federal share greater than the simplified acquisition threshold (currently \$150,000), we are required to review and consider any information about you that is in the designated integrity and performance system accessible through the System for Award Management (SAM) (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). You may, at your option, review information in SAM and comment on any information about yourself that a Federal awarding agency previously entered and is currently available through SAM. We will consider any comments by you, in addition to the other information in the designated system, in making a judgment about your integrity, business ethics, and record of performance under Federal awards when completing the review of risk.

If an we do not make an award to you because we determine your organization does not meet either or both of the minimum qualification standards as described in 45 CFR §75.205(a)(2), we must report that determination to FAPIIS, if certain conditions apply. At a minimum, the information in the system if you are a prior Federal award recipient must “demonstrate a satisfactory record of executing programs or activities under Federal grants, cooperative agreements, or procurement awards; and integrity and business ethics.” 45 CFR § 75.205(a)(2); see also 45 CFR §75.212 for additional information.

4. Anticipated Announcement and Federal Award Dates

HHS/OASH seeks to award funds as much in advance of the anticipated project start date shown in Section B “Federal Award Information,” as practicable, with a goal of 10-15 days.

Note this is an estimated start date and award announcements may be made at a later date and with a later project period start date.

F. FEDERAL AWARD ADMINISTRATION INFORMATION

1. Federal Award Notices

HHS/ OASH does not release information about individual applications during the review process. If you would like to track your application, please see instructions at <http://www.grants.gov/web/grants/applicants/track-my-application.html>. The official document notifying you that a project application has been approved for funding is the Notice of Award (NOA), approved by a Grants Management Officer of the HHS/OASH OGM. If you are successful, you will receive this document via system notification from our grants management system (Grant Solutions) and/or via e-mail. This document notifies the successful recipient of the amount awarded, the purposes of the award, the anticipated length of the project period, terms and conditions of the award, and the amount of funding to be contributed by the recipient to project costs, if applicable.

If you receive an NOA, we strongly encourage you to read the entire document to ensure your organization's information is correct and that you understand all terms and conditions. You should pay specific attention to the terms and conditions, as some may require a time-limited response. The NOA will also identify the Grants Management Specialist and Program Project Officer assigned to the award for assistance and monitoring.

If you are unsuccessful or deemed ineligible according to the disqualification criteria, you will be notified by HHS/OASH by email and/or letter. If your application was reviewed by the independent review panel, you may receive summary comments pertaining to the application

resulting from the review process. On occasion, you may receive a letter indicating that an application was approved but unfunded. These applications may be kept active for one year and may be considered for award without re-competing should funds become available during the hold period.

2. Administrative and National Policy Requirements

If you are successful and receive a Notice of Award, in accepting the award, you agree that the award and any activities thereunder are subject to all provisions of 45 CFR part 75, currently in effect or implemented during the period of the award, or other Department regulations and policies in effect at the time of the award.

In addition, your organization must comply with all terms and conditions outlined in the Notice of Award, the U.S. Department of Health and Human Services (HHS) Grants Policy Statement (GPS), requirements imposed by program statutes and regulations and HHS grant administration regulations, as applicable, as well as any requirements or limitations in any applicable appropriations acts. The current HHS GPS is available at <http://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf> Please note HHS plans to revise the HHS GPS to reflect changes to the regulations; 45 CFR parts 74 and 92 have been superseded by 45 CFR part 75.

You may only use award funds to support activities outlined in the approved project plan. If your application is funded, your organization will be responsible for the overall management of activities within the scope of the approved project plan. Please consult the HHS GPS Section II and 45 CFR § 75.308 for aspects of your funded project that will require prior approval from the Grants Management Officer for any changes. Modifications to your approved project that will require prior approval include, but are not limited to: a change in the scope or the

objective(s) of the project or program (even if there is no associated budget revision, such as reduction in services, closing of service or program site(s)); significant budget revisions, including changes in the approved cost-sharing or matching; a change in a key person specified in your application; reduction in time devoted to the project by the approved project director or principal investigator, either as percentage of full-time equivalent of 25% or more or absence for 3 months or more; or the subawarding, transferring or contracting out of any work that was not described in the approved proposal.

Closeout of Award

Upon expiration of your project period, if we do not receive acceptable final performance, financial, and/or cash reports in a timely fashion within the closeout period, and we determine that closeout cannot be complete with your cooperation or that of the Principal Investigator/ Project Director, we may elect to complete a unilateral closeout. (See F.3 Reporting below for closeout reporting requirements.) As a result, we may determine that enforcement actions are necessary, including on another existing or future award, such as withholding support or a high-risk designation.

Lobbying Prohibitions

You shall not use any funds from an award made under this announcement for other than normal and recognized executive legislative relationships. You shall not use funds for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local

legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

You shall not use any funds from an award made under this announcement to pay the salary or expenses of any employee or subrecipient, or agent acting for you, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.

The above prohibitions include any activity to advocate or promote any proposed, pending, or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

Non-Discrimination Requirements

Pursuant to Federal civil rights laws, if you receive an award under this announcement you must not discriminate on the basis of race, color, national origin, disability, age, and in some cases sex and religion. The HHS Office for Civil Rights provides guidance for complying with civil rights laws that prohibit discrimination. <https://www.hhs.gov/civil-rights/index.html>.

HHS provides guidance to recipients of federal financial assistance on meeting the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency. See *Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons*, 68 Fed. Reg. 47311, 47313 (HHS Office for Civil Rights, 2003, www.gpo.gov/fdsys/pkg/FR-2003-08-08/pdf/03-20179.pdf) You must ensure your contractors and subrecipients also comply with federal civil rights laws

The *National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care* (National CLAS Standards), 78 Fed. Reg. 58539, 58543 (HHS Office of Minority Health, 2013, www.gpo.gov/fdsys/pkg/FR-2013-09-24/pdf/2013-23164.pdf), provides a practical framework for applicants to provide quality health care and services to culturally and linguistically diverse communities, including persons with limited English proficiency. Compliance with the National CLAS Standards meets the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency.

Smoke- and Tobacco-free Workplace

The HHS/OASH strongly encourages all award recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. This is consistent with the HHS/OASH mission to protect and advance the physical and mental health of the American people.

Acknowledgement of Funding and HHS Rights to Materials and Data

Federal support must be acknowledged in any publication you develop using funds awarded under this program, with language such as:

This publication (journal article, etc.) was supported by Award No. _____ from the Office of the Assistant Secretary of Health (OASH). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of OASH.

All publications you develop or purchase with funds awarded under this announcement must be consistent with the requirements of the program. You own the copyright for materials that you develop under this award, and pursuant to 45 CFR § 75.322(b), HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for Federal purposes, and to authorize others to do so. In addition, pursuant to 45 CFR § 75.322(d), the Federal government has the right to obtain, reproduce, publish, or otherwise use data produced under this award and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for Federal purposes.

Trafficking in Persons

Awards issued under this funding opportunity announcement are subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. § 7104). For the full text of the award term, go to http://www.hhs.gov/opa/grants/trafficking_in_persons_award_condition.html. If you are unable to access this link, please contact the Grants Management Specialist identified in this funding opportunity announcement to obtain a copy of the term.

Efficient Spending

This award may also be subject to the HHS Policy on Promoting Efficient Spending: Use of Appropriated Funds for Conferences and Meetings, Food, Promotional Items, and Printing and

Publications available at <http://www.hhs.gov/grants/contracts/contract-policies-regulations/efficient-spending/>

To be considered for an award under this funding opportunity, you must provide detailed budget information on the cost of the required conference or meeting in accordance with this HHS policy. You may be contacted for additional information if your application is not sufficient to meet HHS policy requirements.

Pilot Whistleblower Protection

If you receive an award, you will be subject to a term and condition that applies the terms of 48 CFR § 3.908 to the award, and requires that you inform your employees in writing of employee whistleblower rights and protections under 41 U.S.C. § 4712 in the predominant native language of the workforce.

Same-sex Spouses, Marriages, and Households

A standard term and condition of award will be included in the final Notice of Award (NOA) that states: “In any grant-related activity in which family, marital, or household considerations are, by statute or regulation, relevant for purposes of determining beneficiary eligibility or participation, grantees must treat same-sex spouses, marriages, and households on the same terms as opposite-sex spouses, marriages, and households, respectively. By “same-sex spouses,” HHS means individuals of the same sex who have entered into marriages that are valid in the jurisdiction where performed, including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By “same-sex marriages,” HHS means

marriages between two individuals validly entered into in the jurisdiction where performed, including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By “marriage,” HHS does not mean registered domestic partnerships, civil unions, or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage.”

Human Subjects Protection

Federal regulations (45 CFR Part 46) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If research involving human subjects is anticipated, you must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in 45 CFR part 46. You may find it online at

<http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>.

Applicants that plan to engage in research involving human subjects are encouraged to provide information regarding participation in research in their recruitment efforts and provide a link to www.hhs.gov/about-research-participation.

3. Reporting

Performance Reports

You must submit performance reports on a quarterly basis. Your performance reports must address content required by 45 CFR § 75.342(b)(2). The awarding program office may

provide additional guidance on the content of the progress report. You must submit your performance reports by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

You will also be required to submit a final performance report covering the entire project period 90 days after the end of the project period. You must submit the final report by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

Performance Measures

At the end of each budget year of this cooperative agreement you should be able to:

1. Describe your collaboration with any partnering organization(s), training center(s), and/or researcher(s), and their impact on training, technical assistance, the clinical training meeting, and/or other activities funded through this cooperative agreement;
2. Describe clinical skills assessment practices/strategies/methods/tools that you have developed, instituted, or that are under review by the NCTCFP (Clinical Skills Assessment);
3. Describe how your accomplishments and progress have improved the competency and clinical skills of Title X family planning service providers, and contributed to their attainment of the knowledge, skills, and attitudes necessary for the effective delivery of high quality family planning services (Clinical Skills Development);
4. Describe your efforts to disseminate training products, materials, and research, e.g., manuscripts, publications, or other methods of disseminating results and outcomes of training, assessments, biennial clinical training meetings, and other activities funded through this cooperative agreement;

5. Describe participant involvement in your training activities and annual clinical training meetings, e.g., numbers of participants and types of participants; and
6. Describe your efforts to contextualize clinical training activities within a holistic optimal-health framework.

Financial Reports

You will be required to submit quarterly Federal Financial Reports (FFR) (SF-425). Your specific reporting schedule will be issued as a condition of award. You will also be required to submit a final FFR covering the entire project period 90 days after the end of the project period. You must submit FFRs via our grants management system (GrantSolutions.gov) FFR module.

Quarterly cash reporting to the HHS Payment Management System on the FFR is also required. Please note, at this time, these FFR reports are separate submissions via the Payment Management System. At this time, data is not transferable between the two systems and you will report twice on certain data elements.

Audits

If your organization receives \$750,000 or greater in Federal funds, it must undergo an independent audit in accordance with 45 CFR part 75, subpart F.

Non-competing Continuation Applications and Awards

Each year of the approved project period, you will be required to submit a noncompeting application which includes a progress report for the current budget year, and work plan, budget and budget justification for the upcoming year. Specific guidance will be provided via Grant

Solutions well in advance of the application due date. HHS/OASH will award continuation funding based on availability of funds, satisfactory progress of the project, grants management compliance, including timely reporting, and continued best interests of the government. Additionally, failure to provide final progress or financial reports on other awards from HHS may affect continuation funding.

FFATA and FSRS Reporting

The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System (<http://www.FSRS.gov>) for all sub-awards and sub-contracts issued for \$25,000 or more as well as addressing executive compensation for both recipient and sub-award organizations.

Reporting of Matters Relating to Recipient Integrity and Performance

If the total value of your currently active grants, cooperative agreements, and procurement contracts from all Federal awarding agencies exceeds \$10,000,000 for any period of time during the period of performance of this Federal award, then you must maintain the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)) about civil, criminal, or administrative proceedings described in paragraph A.2 of Appendix XII to 45 CFR part 75—Award Term and Condition for Recipient Integrity and Performance Matters. This is a statutory requirement (41 U.S.C. § 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past

performance reviews required for Federal procurement contracts, will be publicly available. For more information about this reporting requirement related to recipient integrity and performance matters, see Appendix XII to 45 CFR part 75.

Other Required Notifications

Before you enter into a covered transaction at the primary tier, in accordance with 2 CFR § 180.335, you as the participant must notify HHS/OASH, if you know that you or any of the principals for that covered transaction:

- (a) Are presently excluded or disqualified;
- (b) Have been convicted within the preceding three years of any of the offenses listed in 2 CFR § 180.800(a) or had a civil judgment rendered against you for one of those offenses within that time period;
- (c) Are presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses listed in 2 CFR § 180.800(a); or
- (d) Have had one or more public transactions (Federal, State, or local) terminated within the preceding three years for cause or default.

At any time after you enter into a covered transaction, in accordance with 2 CFR § 180.350, you must give immediate written notice to HHS/OASH if you learn either that—

- (a) You failed to disclose information earlier, as required by 2 CFR § 180.335; or
- (b) Due to changed circumstances, you or any of the principals for the transaction now meet any of the criteria in 2 CFR § 180.335.

G. CONTACTS

Administrative and Budgetary Requirements:

For information related to administrative and budgetary requirements, contact the HHS/OASH grants management specialist listed below.

Robin Fuller
Office of Grants Management
1101 Wootton Parkway, Suite 550
Rockville, MD
Phone: 240-453-8822
Email: Robin.Fuller@hhs.gov

Program Requirements

For information on program requirements, please contact the program office representative listed below. The Letter of Intent should be sent to the following address:

Aisha N. Cody, MPA, CHES
Office of Population Affairs
1101 Wootton Parkway, Suite 700
Rockville, MD
Phone: 240-453-2807
Email: Aisha.Cody@hhs.gov

Electronic Submission Requirements

For information or assistance on submitting your application electronically via Grants.gov, please contact Grants.gov directly. Assistance is available 24 hours a day, 7 days per week.

GRANTS.GOV Applicant Support

Website: www.grants.gov

Phone: 1-800-518-4726

Email: support@grants.gov

H. OTHER INFORMATION

Awards under this Announcement

We are not obligated to make any Federal award as a result of this announcement. If awards are made, they may be issued for project periods shorter than indicated. Only the grants officer can bind the Federal government to the expenditure of funds. If you receive communications to negotiate an award or request additional or clarifying information, this does not mean you will receive an award; it only means that your application is still under consideration.

Application Elements

The below is a summary listing of all the application elements required for this funding opportunity.

Application for Federal Assistance (SF-424)

Budget Information for Non-construction Programs (SF-424A)

Assurances for Non-construction Programs (SF-424B)

Disclosure of Lobbying Activities (SF-LLL)

Project Abstract Summary

Project Narrative – Submit all Project Narrative content as a single acceptable file, specified above.

Budget Narrative – Submit all Budget Narrative content as a single acceptable file, specified above.

Appendices – Submit all appendix content as a single acceptable file, specified above **in the Attachments section of your Grants.gov application.**

Work Plan, Letters of Commitment from Subrecipient Organizations and Agencies,
Curriculum Vitae/Resume for Key Project Personnel, Organizational Charts

Valerie Huber

April 19, 2018

Valerie Huber

Deputy Assistant Secretary for Population Affairs (Acting)

Date